SURMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning F/epart. PO Box 58 Washburn, WI 54/891 (715) 373-6138

APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**

Date Stamp (Received) MAY 03 2019



Permit #: Date: **Amount Paid:** Refund:

Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued up

Checks are made pay	able to: B	ayfield C		Department.	ТО АРР	PLICANT.			FILL OUT	TIN INK (NO PENCIL	<u>.</u>)	
TYPE OF PERMIT F	REQUEST	TED→	☐ LAND	O USE 🗆 SA	NITAR	Y PRIVY	CONDITION	IAL USE	☐ SPECIAL	USE 🗆	B.O.A.	_ OT	HFR
Owner's Name:						ng Address:		y/State/Zip		OJL 🛮	Tel	ephone:	
Scott #B		ira	Mik	a	City	030 Dodd I	Srive C	able,	WI S	:482	.(<i>S)</i> 794 I Phone:	f-2435
44030	Do	odd	Dri	ve	0	able, h	11 54	821			Cal	2)591	7-8793
Contractor:	^		010	•	_		Plumber:					mber Ph	
Brent		orng				292-7287							
Authorized Agent: (Person Sigr	ning Appli	cation on behalf	f of Owner(s))	Agen	t Phone:	Agent Mailing A	Address (inc	clude City/State	/Zip):	Att	itten Auf ached Yes 🗆	thorization No
PROJECT LOCATION	Legal	Descrip	tion: (Use Ta	ax Statement)	Tax II	25151	\$ 2515	52 \$	25/53	Recorded	d Documen	t: (Showi	ng Ownership)
1/4,	1	L/4	Gov't Lot	Lot(s)	CSM	Vol & Page CSN		t(s) No. 8-50	Block(s) No.	Subdivisi	on: aKa 9	อก	4
Section		nship _	43 N, R	ange 6	w	Town of: Namal	Kaann			Lot Size		Acreage	820
	☐ Is F	Property	/Land withir	n 300 feet of Riv	er, Stre	eam (incl. Intermittent))	ructure is	from Shorelin	e:	Is Property		Are Wetlands
X Shoreland →		ek or Landward side of Floodplain?				If yescontinue>					oodplain Z		Present?
	X Is P	Property	/Land withir	n 1000 feet of La		nd or Flowage /escontinue	Distance Str	ructure is	from Shorelin	e : feet	Yes No		¥Yes □ No
☐ Non-Shoreland											/		
- Non-Shoreland													
Value at Time							# of		\A/h	at Type o	·ŧ		Type of
of Completion * include	- 1	Proje	ct	# of Stori	es	Foundation	bedrooms			at Type of Sanitary S			Water
donated time &			- 144				in			he prope			property
material	XNev	v Const	ruction	1-Story		☐ Basement	□ 1	□ Mı	unicipal/City			. 111	☐ City
			Alteration	☐ 1-Story +	Loft	☐ Foundation	□ 2		ew) Sanitary	Specify T	уре:		_ X Well
200,000	☐ Con	version	1	☐ 2-Story		y Slab	Ж 3	X Sai	nitary (Exists) Specify T	Гуре: МС	und	
			xisting bldg)						vy (Pit) or			O gallon)	
			ness on			Use	□ None		rtable (w/ser		ct)		
		perty			X Year Round			□ Co	mpost Toilet				\dashv
				I				2000 141200					
Proposed Constr		rmit beir	ng applied fo	r is relevant to i	t)	Length: 68	30	Width Width			Height Height		25'
Proposed Us	se	1		71.5		Proposed Structu	re			Dime	ensions	Ti le	Square Footage
-			Principal	Structure (fire	st struc	cture on property)				(X)	Tootage
,			Residence	e (i.e. cabin, h	unting	shack, etc.)		69	8X42	1 61	x 48)	2449.7
*				with Loft						<u> </u>	Х)	
Residential	Use			with a Porc	8.44			14	5 × 5		x 53)	90
				with (2 nd) P						-	x 53 x)	
5				with (2 nd) D			1			(X)	
☐ Commercia	l Use		-	with Attach		ırage		24	×29	181	x 63)	672
-			Bunkhous	se w/ (□ sanita	ry, <u>or</u>	☐ sleeping quarters	, <u>or</u> \square cooking	& food pr	ep facilities)	(X)	
×			Mobile H	ome (manufact	tured da	ate)				(Χ)	
	Icc		Addition/Alteration (specify)								Х)	
☐ Municipal L)SE		Accessory Building (specify)								Х)	
Dealte			Accessory Building Addition/Alteration (specify)								Х)	
Rec'd for Is	suance	-											
MAY 20	2010		Special U	se: (explain)						(X)	
MAI 20	2010		Conditional Use: (explain) Other: (explain)								X)	
Secretaria	Staff									1	Х)	
I (we) declare that this a (are) responsible for the	application (detail and	accuracy o	ny accompanyin f all information	g information) has be I (we) am (are) provid	en exami	RTING CONSTRUCTION or ned by me (us) and to the be hat it will be relied upon by application. I (we) consent	est of my (our) kno Bayfield County in	wledge and bo determining v	elief it is true, corre whether to issue a p	ct and comple permit. I (we)	further accep	t liability w	hich may be a
property at any reason	ble time for	r the purpo	se of inspection.		0	7) 12. N		<u> </u>		1	1	75
Owner(s):	cott	1	Niko	t		artare (1. Muk	~		Date _	4/4	+/1°	1
(If there are Mult	iple Owne	ers listed	on the Deed	All Owners must	sign <u>or</u>	letter(s) of authorizat	ion must accom	pany this a	pplication)				
Authorized Agent	: (If yo	ou are sig	ning on beha	If of the owners) a lette	r of authorization mu	st accompany th	nis applicati	on)	Date _			
			, o o ocila				- accompany to						
Address to send p										C	Attac py of Tax	_	none

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurem	nent	Description	Measureme	ent
Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	15 82/8	Feet Feet	Setback from the Lake (ordinary high-water mark)	140	Feet
Setsack Holli the Established Right-Oi-Way	82	reet	Setback from the River, Stream, Creek Setback from the Bank or Bluff	_	Feet Feet
Setback from the North Lot Line	15	Feet			
Setback from the South Lot Line	8253	Feet	Setback from Wetland	140	Feet
Setback from the West Lot Line	70 7	Feet	20% Slope Area on the property	☐ Yes 🕅	No
Setback from the East Lot Line	140 82	Feet	Elevation of Floodplain	1404	Feet
Setback to Septic Tank or Holding Tank	34	Feet	Setback to Well	2	Feet
Setback to Drain Field		Feet			
Setback to Privy (Portable, Composting)	_	Feet			

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number: 46 713 4 # of bedrooms: 3			Sanitary Date: 6/23/06				
Permit Denied (Date):	Reason for Denial:							
Permit#: 19-0114	Permit Date: 5-2	0-19						
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Recon	ious Lot(s)) 🗹 No	Mitigation Required Mitigation Attached	☐ Yes ☑ No ☐ Yes ☐ No	Affidavit Required				
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by Variance (B.O.A.) Solution Yes No Case #:						
		Were Property Line	es Represented by Owner Was Property Surveyed	☐ Yes ☐ No				
Inspection Record:		1		Zoning District (R-/) Lakes Classification ()				
Date of Inspection: 5/16/19	Merlen		Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Attac	ched?	No they need to be atta	ched.)					
Signature of Inspector:	Condition: Construction practices shall be implemented in properties or wetlands shall be obtained.	lemented to prevent ation onto neighbo	any ring	Date of Approval: 5/17//9				
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:					

own, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - Reconnect 767134
SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Issued To: Scott & Barbara Mika 19-0114 No. Location: 10 43 Town of **Namakagon** Section Township Range 6 W. $\frac{1}{4}$ of -49 & 50 Subdivision Namakagon Gov't Lot Lot Block CSM#

For: Residential Use: [1- Story; Residence (68' x 42') = 2,856 sq. ft.; Porch (18' x 5') = 90 sq. ft.; Attached Garage (24' x 28') = 672 sq. ft.] Total Overall = 3,618 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit shall be obtained.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated

Tracy Pooler

Authorized Issuing Official

May 20, 2019

Date

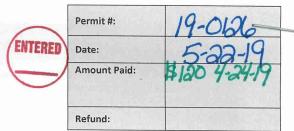
SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

> Date Stamp (Received) APR 2 4 2019

Bayfield Co. Zoning Dept.



INSTRUCTIONS: No permits will be issued until all fees are paid.

DO NOT START CON				Department. NAVE BEEN ISSU	JED TO APP	LICANT.			FILL OU	TININK (NO PENCIL)		
TYPE OF PERMIT	REQUES	STED-	- □ LANI	USE 🗆 S	SANITAR	Y PRIVY	□ CONDIT	IONAL US	E SPECIAL	USE 🗆	B.O.A.	OTHE	R
Owner's Name:					Maili	ng Address:		City/State	/Zip:		Telepho	one:	
Thomas	Rol	rick			750	7503 Timbervolf Cir Anchologe AK 99507 City/State/Zip: Cell Phone: 690							
Address of Property: 23145 Missionary Point Circle Contractor:						State/Zip:		Cell Phone: 49 0					
23145 Mis	sione	ary 1	oins C	irele	Ca	able W ractor Phóne:	I 5	4821					747
contractor.						413-1060	Plumber:	Plumber Phone:			e:		
Dale Kr Authorized Agent: (Person Sig	ning Appl	cation on behal	f of Owner(s))		t Phone:	e/Zip): Written Authorizati			rization			
									Attached ☐ Yes ☐ No				
PROJECT Legal Description: (Use Tax Statement)						D#		Recorded Document: (Showing Owne			Ownership)		
LOCATION	Lega	Descrip		Section 1.		2504				2015		2576	677
1/4 1/4					CSM		SM Doc#	Lot(s) No.	Block(s) No.	Subdivision:			
					1158 P.64 Town of:				Missionary Point Lot Size Acreage			nT	
Section 2	, Tow	nship _	<u>43</u> N, R	ange <u>6</u>	_ w		akas	20		Lot Size		age). 69	
												.01	U
				1 300 feet of I f Floodplain?		eam (incl. Intermittent		e Structure	is from Shorelin	6004	Property in		Wetlands
☐ Shoreland →	 ✓ Is	Property	/Land withir	1000 feet of		nd or Flowage		e Structure	is from Shorelin	FIO	odplain Zone? Ves		resent? Ves
		•	•			escontinue —	The state of the s		2 / / 40	feet	No		№No
☐ Non-Shoreland													
Value at Time					E NOTE OF	B CONTRACTOR MAN	EM TENERAL						No chemical
of Completion							Total		W	at Type o	f		Type of
* include		Proje	ct	# of Sto	ories	Foundation	in			Sanitary Sy			Water
donated time & material						struct	structure Is on t		the proper	ty?		property	
			truction	☐ 1-Story		☐ Basement ☐ 1			☐ Municipal/City				☐ City
\$ 110			Alteration	1-Story		☐ Foundation		□ 2 □ (New) Sanitary Specify Ty □ 3 ★ Sanitary (Exists) Specify Ty □ □ Privy (Pit) or □ Vaulted					
40,000		ocate (e		2-Story		X Slab							
Relocate (existing bldg)													
	☐ Rur	n a Busi	ness on			Use	X No	ne 🗆	Portable (w/ser	vice contrac	:t)		
	Pro	n a Busi perty	ness on			X Year Round			Portable (w/ser Compost Toilet		t)		
			ness on			A CONTRACTOR OF THE PARTY OF TH					t)		
Existing Structure	Pro : (if pe	perty ermit bei		r is relevant t	o it)	Year Round	d	Wic	Compost Toilet None Ith:		Height:		
Existing Structure Proposed Constr	Pro : (if pe	perty ermit bei		r is relevant t	o it)	Year Round			Compost Toilet None Ith:			10	
Proposed Constr	Pro : (if peruction:	perty		r is relevant t	o it)	Length:	40	Wic	Compost Toilet None Ith:		Height: Height:	<i>10</i>	quare
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(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 7503 Timber wolf Circle Anchorage AK

Attach Copy of Tax Statement

Date

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE box below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL **Show Location of: Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3)Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Show: (5)(6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7)Show any (*): (*) Wetlands; or (*) Slopes over 20% Missionery Point Circle Road NA Purposid priveled ay West Surage IOT line Attacho Existing House XXXXXX ST XXXXX + Drainfield × , X Road Missionary Point Dr. AKE Nama Kagan Please complete (1) – (7) above (prior to continuing) Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement		Description	Measuren	nent
Setback from the Centerline of Platted Road	70 Feet		Setback from the Lake (ordinary high-water mark)	2001	
Setback from the Established Right-of-Way	Feet		Setback from the River, Stream, Creek	200 + N/A	Feet Feet
Setback from the North Lot Line			Setback from the Bank or Bluff	NIA	Feet
Setback from the South Lot Line	50 + Feet	-	Sathagi, from Watley I		
Setback from the West Lot Line	Feet YS Feet	1000	Setback from Wetland 20% Slope Area on the property	NA	Feet
Setback from the East Lot Line	180 F Feet		Elevation of Floodplain	□ Yes &	No Feet
Setback to Septic Tank or Holding Tank	/25 + Feet		Cohbanista MV II		,,,,,
Setback to Drain Field	100 + Feet	-	Setback to Well	100 +	Feet
Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet	MID Feet	0.8			line.

ary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to complying with state and federal laws concerning construction the laws of specific permits.

to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:		
Permit Denied (Date):	Reason for Denial:					
Permit #: 19-0126	Permit Date: 5-2	2-19				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Reco Yes Ye	uous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached	□ Yes □ No	
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by	/ Variance (B.O.A.)	e #:		
Was Parcel Legally Created Was Proposed Building Site Delineated Yes No		Were Property Line	s Represented by Owner Was Property Surveyed			
Inspection Record: 5h Pink Garage 5/1/19 8 ft from Tall Opens Parking 5/16/19	changed pla	en Warive fill ceased = Old		Zoning District Lakes Classification	(R-1)	
Date of Inspection: 5/1/19	Inspected by:	11		Date of Re-Inspec	tion:	
Signature of Inspector: Signature of Inspector: Shape	ondition: Construction s actices shall be implem osion or sedimentatio operties or wetlands. No all be obtained.	ite best management ented to prevent any n onto neighboring ecessary UDC permit		Date of Appro	val: 5/21//	
Hold For Sanitary: Hold For TBA:	Hold For Arnu	avic.	For Fees:		, ,	

own, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

19-0126 **Thomas Rohrick** Issued To: No. Location: **Township** Range 6 Town of **Namakagon** 43 $\frac{1}{4}$ of Section W. 33 **Block** Subdivision Missionary Point Gov't Lot Lot CSM#

For: Residential Accessory Structure: [1-Story; Garage (32' x 40') = 1,280 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit shall be obtained.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

May 22, 2019

Date